



FACILITY RENTAL APPLICATION

Business Name & Event: _____

Name & Private Event: _____

Date: of Event: _____

Contact Person: _____ Phone #: _____

Address: _____

Facilities Requested: *(Select all the may apply)*

Main Pool: _____ Water Playground Pool: _____ All (3) Swimming Pools: _____

Arena: _____ Ice Arena: _____ Picnic Shelters: _____ Tennis Courts: _____

Number of Adults: _____ Number of Children: _____

Will you be providing the food? : _____ Will the event be catered? : _____

Details: _____

Do you have a special request for your event? : _____

Equipment needed*: *(Select all the may apply)*

Of Tables needed: _____ # Of Chairs needed: _____

TV: _____ DVD: _____ Radio: _____ CD Player: _____ Tape Player: _____

Sound System (Mic): _____ Podium: _____ Coffee Urn: _____

Extension Cords: _____ How many? _____ How Long? _____

Additional Information:

Parking Arrangements? _____

Will you be using any outside grounds, if so what areas? _____

Any other special requests? _____

Will you be cleaning after your rental or is the MARC? _____

Maintenance Fee: _____ Added Trash Removal: _____

Signature of Person in charge of event: _____ Date: _____

Approved by:

Assistant Director/Director: _____ Date: _____

**If additional expenses are incurred for your rental, this will be added to your rental fee or sent to you after the event*